



CITY OF BRIGHTON VOLUNTEER COACH APPLICATION

We appreciate your interest in volunteering for our community. In order to insure that we select the most qualified volunteers for our programs AND to insure the safety of our children and adults participating in these programs, we request that you complete all sections of this volunteer application.

Full Name (First, MI, Last):		Home Telephone #: ()	Work Telephone #: ()					
Street Address:		City, State, Zip Code	Email Address					
Social Security Number:	Date of Birth (Mo/Day/Yr):	Have you ever been known by another name? YES NO If YES, indicate below:						
What sport are you interested in coaching? What is the name/age of the child your interested in coaching?								
Please indicate day(s) and time(s) you are available to volunteer	TIME OF DAY	SUN	MON	TUE	WED	THU	FRI	SAT
	Morning							
	Afternoon							
	Evening							
Please mark the months you wish to volunteer.								
January	March	May	July	September	November			
February	April	June	August	October	December			
The City of Brighton does not place volunteers in positions of direct supervision by a relative. Please list any relatives (including spouse) employed by the City of Brighton.								
WORK EXPERIENCE								
List your current or last position including your dates of hire/termination, name/address of employer, telephone number, supervisor's name, and a brief description of duties.								
From (Mo/Yr):	To (Mo/Yr):	Name of Company Street Address, City, State, Zip Code Telephone Number (Include Area Code) Supervisor's Name				Description of Duties:		

VOLUNTEER EXPERIENCE

Please note dates, types, places of experience, immediate supervisor's name and telephone number:

EMERGENCY NOTIFICATION INFORMATION

Contact Name:

Relationship:

Street Address, City, State, Zip Code:

Home Telephone Number: ()

Work Telephone Number: ()

BACKGROUND

Have you ever been charged with a crime that resulted in plea of guilty, no contest, deferred judgment, deferred prosecution or conviction of any law violation (except minor traffic violations)? YES NO If YES, list for each conviction: (1) date of offense; (2) charge; (3) jurisdiction; (4) court name, and (5) disposition.

Have you ever been involved in an incident involving child/elder abuse or child/elder neglect? YES NO If YES, please explain below:

SIGNATURE, CERTIFICATION, RELEASE OF INFORMATION, AND RELEASE OF LIABILITY

I certify that the information in this application is true and complete. I understand that false statements, misrepresentations or omissions of information in this application may result in rejection of this application. The City is expressly authorized to investigate all statements contained in this application. I consent to the release of information about my ability and fitness for volunteer assignment by employers, schools, law enforcement agencies, and other individuals and organizations to investigators, personnel staffing specialists, and other authorized employees of the City of Brighton.

In the event that I am selected to become a volunteer for the City of Brighton, I agree to comply with all of its ordinances, rules, and regulations. I fully understand and agree to provide my services to the City of Brighton as a volunteer in a voluntary capacity and that I will receive no compensation or benefits for services provided.

As a participant, I understand that the above described activities may involve risks of injury, loss or damage to myself, including, but not limited to bodily injury, personal injury, sickness, disease, death, and property loss or damage. By signing this agreement, as a volunteer, I expressly agree to assume any and all such risks. In addition, in consideration for being permitted to perform the above described activities, as a volunteer, I hereby expressly exempt and release the City, its officers, employees, insurers, and self-insurance pool, from and against all liability, claims and demands, on account of injury, loss, or damage to myself, including without limitation claims arising from bodily injury, personal injury, sickness, disease, death, or property loss or damage, that I may incur as a result of being upon the premises of the City or as a result of performing the above described activities, whether any such liability claims, and demands result from the act, omission, negligence, or other fault on the part of the City, its officers, or its employees, or from any other cause whatsoever.

By Signing Below, I agree that I understand and consent to the above statement:

Volunteer's Signature:

Date:

If Volunteer is Under 18, Signature of Parent/Guardian:

Date:

FOR CITY USE ONLY

Reviewed by

Comments:

Police Background:

Sex-Offender Registry:

Fingerprint Check:

CITY OF BRIGHTON

VOLUNTEER YOUTH COACHING CONTRACT

I understand that my responsibilities as a volunteer coach are of great importance and that my actions have the potential to significantly influence the young athletes whom I coach. Therefore, I promise to uphold the following rights of young athletes to the best of my ability.

1. The right to participate in sports.
2. The right to participate at a level appropriate to each child's maturity and ability level.
3. The right to receive qualified adult leadership.
4. The right to play as a child and not as adult.
5. The right to share in the leadership and decision-making of their sport.
6. The right to participate in a safe and healthy environment.
7. The right to proper preparation for participation in sports.
8. The right to an equal opportunity to strive for success.
9. The right to be treated with dignity.
10. The right to have fun in sports.

I also promise to conduct myself in accordance with the Code of Ethics for Coaches as given below.

1. I will treat each player, opposing coach, official, parent and administrator with respect and dignity.
2. I will do my best to learn the fundamental skills, teaching and evaluation techniques and strategies of my sport.
3. I will become thoroughly familiar with the rules of my sport.
4. I will become familiar with the objectives of the youth sports program with which I am affiliated and I will strive to achieve these objectives and communicate them to my players and their parents.
5. I will uphold the authority of the officials who are assigned to my sport and I will assist them , in every way, to conduct fair and impartial competitive games.
6. I will learn the strengths and weaknesses of my players so that I might place them into situations where they have a maximum opportunity to achieve success.
7. I will conduct my practices and games so all players have an opportunity to improve their skill level through active participation.
8. I will communicate to my players and their parents the rights and responsibilities of individuals on our team.
9. I will protect the health and safety of my players by insisting that all the activities under my control are conducted for their psychological and physiological welfare, rather than for the vicarious interests of adults.
10. I will adhere to all Brighton Parks and Recreation Department policies and procedures.

With my signature, which I voluntarily affix to this contract, I acknowledge that I have read, understood and will do my best to fulfill the promises made herein.

Sport

Date

Signature of Coach

Signature of Coordinator